(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

for LOBBYISTS

RECEIVED

JUL 2 1 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

2017 Statement of Income and Expenses (RSA Chapter 15) PLEASE PRINT

(Nam	ne of partnership, firm or c	orperation)		-
18 Centre Str	eet	Concord	NH	03301
Business Address: (Str	reet)	(Town/City)	(State)	(Zip Code
(603) 225-7170 (Telephone)	(603) 226-0165 (Fax)	e-mail_attys@bi	ancopa.com
III, This statement co	overs: (Choose one – fil	le separate reports f	or each client, OR you ma	y file a separate r
reportable expense tr	ransactions which are i	not attributable to a	ny one chent).	
X All reportable trans	sactions occurring in the	e months prior to the	reporting date relative to the	e following client:
NH Snowmobile	e Association			
	(Full Name of Client as	it appears on the Lobby	ist Registration Form)	
<u>OR</u>				
All reportable transumrelated to any partie		(including the lobbyi	st's family), or the lobbying	, firm listed below
IV. Date of Report Reports cover: activ	April 26, 2017 . ity from date of registration	on to 3/31/17	July 26, 2017 K activity from 4/1/17 to 6/30/17	
	October 25, 2017 :::		January 31, 2018 activity from 10/1/17 to 12/31/	(17
	activity from 7/1/17 to 9/3	30/17	activity from 10/1/17/10/12/31/	17
V. There have been If this box is checked.	n no fees received an	d no reportable tra	ansactions made since the ecretary of State's Office, S	he last report.
V. There have been If this box is checked. Concord, NH 03301. VI. Check if addition	n no fees received and complete just this form	d no reportable tra and submit it to the S d:	ansactions made since the ecretary of State's Office, S	he last report. tate House, Room
V. There have been If this box is checked, Concord, NH 03301. VI. Check if addition If you have receiv	n no fees received and complete just this form nal reports are attached red fees or made expend	d no reportable tra and submit it to the S d: litures, you must file	ansactions made since the ecretary of State's Office, State's Addendum A— Fees and Ex	he last report. itate House, Room : spenses
V. There have been If this box is checked. Concord, NH 03301. VI. Check if addition If you have receiv If you have paid a	n no fees received and complete just this form and reports are attached the fees or made expendent honorarium or reimbu	d no reportable tra and submit it to the S d: litures, you must file	ansactions made since the ecretary of State's Office, S	he last report. itate House, Room
V. There have been If this box is checked. Concord, NH 03301. VI. Check if addition If you have receiv If you have paid a Expense Reimburseme	n no fees received and complete just this form and reports are attached ted fees or made expendent honorarium or reimburnt	d no reportable tra and submit it to the S d: litures, you must file a	ansactions made since the ecretary of State's Office, State's Addendum A— Fees and Ex	he last report. Itate House, Room Repenses Port of Honorarium
V. There have been If this box is checked. Concord, NH 03301. VI. Check if addition If you have receiv If you have paid a Expense Reimburseme	n no fees received and complete just this form and reports are attached ted fees or made expendent honorarium or reimburnt	d no reportable tra and submit it to the S d: litures, you must file a	ansactions made since the ecretary of State's Office, State	he last report. Itate House, Room Repenses Poort of Honorarium
V. There have been If this box is checked. Concord, NH 03301. VI. Check if addition If you have received If you have paid a Expense Reimbursement If you, your firm, Sworn Statement/Aft I have read RSA 15. F	n no fees received and complete just this form the nal reports are attached an honorarium or reimbutent or your family has mad	d no reportable tra and submit it to the S d: litures, you must file ursed expenses, you n le political contribution ad RSA 664 and here	ansactions made since the ecretary of State's Office, State	the last report. Itate House, Room Repenses Port of Honorarium M C- Political Co

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Labbying par	tnambin firm ar corna	ration: Bianco Profess	ional Association
			corporation and not related to any
particular client): NH	Snowmobile Assoc	ciation	
Date of Report (check	one):		
April 26, 2017 🗆	July 26, 2017 💢	October 25, 2017 🗆	January 31, 2018 □
	ums submitted with the		nd Expenses described above, and umber of Addendum forms being
I hereby swear or affirm complete to the best of (Signature of lobbyist) Adam Schmidt			nt and each Addendum is true and 7(17/201> (Date)
(Print Name of lobbyis	t)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of lncome and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association						
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): NH Snowmobile Association						
Date of Report (check one	?):					
April 26, 2017 □	uly 26, 2017 💢	October 25, 2017 🗆	January 31, 2018 □			
			nd Expenses described above, and umber of Addendum forms heing			
Addendum B(s).						
Addendum C(s).						
I hereby swear or affirm t complete to the best of my			nt and each Addendum is true and			
(Signature of lobbyist)	my Fed		July 2017 (Date)			
Kathy Corey Fox						
(Print Name of lobbyist)						

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association					
			corporation and not related to any		
particular client): NH	Snowmobile Asso	ciation			
Date of Report (check	one):				
April 26, 2017 □	July 26, 2017 💆	October 25, 2017 🗆	January 31, 2018 □		
the following Addend submitted):	ums submitted with th		nd Expenses described above, and umber of Addendum forms being		
Addendum A(s).				
Addendum B(s	3).				
Addendum C(s	\$).				
I hereby swear or affir complete to the best of			nt and each Addendum is true and		
(Signature of lobbyist)			7/19/17 (Date)		
Karen Soucy					
(Print Name of lobbyis	st)				